



Question and Answers One ME Sub-recipient Training January 27, 2003

Coalition Members:

During the One ME sub-recipient training, an exercise was conducted to allow sub-recipients an opportunity to brainstorm questions regarding evaluation. You were asked to consider what you would really like to know about your coalition's efforts to reduce substance abuse among youths. This document contains our (i.e., RTI evaluation team) attempt to answer evaluation-related questions raised during this exercise. The intent of the following responses is two-fold. The responses will either (1) answer your questions directly, to the extent possible, or (2) inform you how we intend to answer your question(s)—if it is within the scope of work—as part of our evaluation approach. We will answer as many questions as possible and ask for your patience as details are worked out.

Group I

- How will co-factors be handled in assessing outcomes?

 Fither BTL or H7A will collect begoling survey data from all put.
 - Either RTI or HZA will collect baseline survey data from all program participants. With respect to co-factors, we can analyze baseline data and possibly examine relationships between multiple factors (i.e., co-factors) and substance use among participants.
- What is it that made the program effective?
 - RTI will survey all coalition members annually to assess various perceptions of the effectiveness of each local coalition. We will provide these data in aggregate form to each coalition to improve program effectiveness. We also will examine coalition dynamics as possible explanatory factors for successful outcomes. Successful outcomes will focus on intermediate outcomes (e.g., attitudes toward substance use) as well as the long-term outcome of reductions in substance use.
- How will community's readiness for change be measured?
 We will include some indicators of readiness in Project Director (PD) and Coalition Member surveys and we will explore our options for other methods of assessment.

• Why did the program work or not work? If this question refers to past findings...

Coalition members should refer to the NE CAPT, OSA, and CSAP for these answers.

If this question refers to your selected model program(s)... RTI and HZA plan to examine the relationship between quality of training, coalition dynamics, and program implementation and fidelity as possible co-factors or explanatory variables in determining the success of your selected program(s).

Were we successful?

RTI and HZA will use several data collection instruments and approaches to determine how successful each One ME coalition was toward meeting its goals and objectives. We will collect data from individual program participants, coalition members, and project directors. We also will analyze MYDAUS data from participating One ME communities (i.e., schools) to compare selected indicators to nonparticipating communities.

• Will parental awareness and involvement be assessed?

RTI's evaluation approach does not assess changes in parental awareness or involvement. However, for model programs that do have parental components, we will assess some aspects of awareness and involvement.

How will barriers be identified?

Our coalition member and project director surveys will identify barriers to collaboration, participation, and implementation.

Will unintended effects be monitored?

The process evaluation may capture some indicators' unintended effects. These types of effects should be identified and discussed in the context of the community and factors that may have influenced outcomes.

Group II

How can data be integrated into the Communities that Care (CTC) model?
 We are not certain this will be possible. However, the findings from this evaluation may complement the work of the CTC model.

What methodology will be used for gathering information?

Several data collection instruments will be collected via KIT Solutions (an on-line data collection system). We are still in the process of determining which instruments to incorporate into the system. We also will conduct focus groups with project directors and direct observations of selected program implementation activities.

What methodology will be used for evaluating?

As discussed during the January training, RTI's general approach is to provide a feedback mechanism that allows for program improvement. Specific to One ME communities, we will collect both process and outcome data and use a variety of data collection techniques including observation, focus groups, in-person interviews, and surveys (on-line and mailed).

What methodology will be used to apply the results to the current and future programming?

Program implementation and fidelity is a critical evaluation component that RTI and HZA will assess early and often. Fidelity is defined as a demonstration that all intervention components are delivered in a consistent manner to participants with adherence to the theoretical foundation of the intervention. Information gathered from these assessments can be used for program improvements in this area.

How can these data be used to sustain projects and funding?

Coalitions will have access to their own data via KIT Solutions, although we have not finalized which data will be available using this mechanism. Coalitions can potentially use the information in future proposals to either continue existing work or to demonstrate their capacity to successfully implement new prevention programming. Data also could be presented to local governments to request local funding of projects or specific programs.

Group III

 In data analysis, how do we factor out the impact of other (nonrelated) programs and events?

We will make an attempt to gather general information about other large initiatives occurring within your community. We will then attempt to devise a measure that corrects for those non-related programs. We can only determine the feasibility of such an approach after data have been collected.

What is the process for and content of reporting?

We will discuss the evaluation data collection reporting requirements in full detail during the April training. In general, some data collection/reporting will occur online via KIT Solutions and others will occur through focus groups and mailed surveys. We expect most coalition members (excluding project staff) to have responsibility for completing just one annual survey for the evaluation. As it now stands, we do not anticipate requiring any respondent to complete more that two surveys over the course of the year.

 How do you develop a focused evaluation that also reflects the richness and ancillary impacts of the programs?

RTI's evaluation was designed with focus in mind and attempts to capture the unique nature of each One ME community. It is more difficult to address the

nature of ancillary impact. It is possible that some ancillary information will be captured in the process evaluation, but our evaluation was not originally designed to assess this particular aspect.

 How do we identify and access existing data sources and also measure the reliability of those sources?

Coalitions should only access data from official sources such as federal and state websites to ensure that the data is both valid and reliable. Coalitions might consider exploring the Center for Substance Abuse Prevention (CSAP) Decision Support System (DSS) http://www.preventiondss.org/ as another possible source. Your Needs Assessment resource manual also describes qualitative data collection techniques such as interview, focus groups, and community scans that can complement these existing data sources.

How do we communicate data to the community in a useful way?
 We are considering providing follow-up training that directly addresses this issue.
 We would like to provide coalition representatives with a hands-on experience using real local data to illustrate possible ways to report and disseminate information to your local community.

Group IV

• How will the impact on substance abuse rates regarding parents be assessed?

We are not collecting data on parental substance use. However, for model programs that have a parent component and parent survey, we can ask general questions about substance use/abuse.

- How do we access history/rate (%) of success of programs already implemented in Maine and other states such as Vermont according to the following: rural, Native American, French, and minority populations?
 Please refer to OSA regarding an answer to this question.
- How do we assess specific coalition goals for substance abuse reductions beyond state standards?

Both the MYDAUS and our program-specific survey instruments will provide substance use estimates for a variety of substances. You will be able to look at many types of substances and the prevalence of use among participating youth.

• Will three years suffice to measure impact?

A follow-up period of three years is sufficient to measure general aspects of impact at the local level. At the April training we will discuss how the local evaluation data and the state-level evaluation can be used to assess short- and long-term impact.

 How does domestic violence and poverty impact substance abuse in youth? Are there data available?

A member of the Greater Waterville coalition is currently collecting and compiling this information. Please contact Ms. Lauren Walsh (207-877-7630) to find out exactly when this information will become available.

How reliable is the MYDAUS data?

The answer to this question is best provided by OSA and/or Pan Atlantic. RTI is working under the assumption that these data are reliable.

Group V

- How can we use evaluation to generate community dialogue/discussion about substance abuse and subsequent community involvement (action)?
 It would seem reasonable that a coalition could organize a community forum to discuss findings from some of their local efforts. However, you would need to have a specific plan of action regarding the purpose of such a dialogue.
- How do we measure community perceptions regarding the discussions and subsequent involvement?

You could design a simple survey (1-page) that asks participants about general perceptions based on the topics covered during the forum. This would provide some qualitative data about the effectiveness of the meeting and some possible next steps. It is also possible that RTI's on-site evaluator could provide some evaluation technical assistance (TA) to design a slightly more sophisticated measurement tool.

 How can we assess current and past programs used to address underage substance use and abuse – success in other populations?
 CSAP's model program list is an excellent source for specific programs to use.
 Beyond that, we suggest that coalitions make programmatic requests to OSA/One ME staff.

• What benchmarks will coalitions identify to determine readiness for significant policy change?

We have not decided on how we might evaluate environment strategies that might include policy change. To the extent that we do evaluate such strategies, RTI will work with coalition members to identify appropriate indicators. Our selected approach will build on previous research and extant literature in this area. We also are waiting for the selection of specific environmental strategies to better inform us about decisions regarding the best way to evaluate these strategies.

How many 12-17 year olds need to be surveyed?
 The minimum number of survey respondents per model prod

The minimum number of survey respondents per model program should not be less than 30 youths.

 Regarding the initial process of information gathering what criteria will be used to determine indicators and technical assistance resources provided?
 RTI will use its prior experience in evaluating other State Incentive Grants (SIG) and its current discussion with members of the evaluation workgroup to determine variables of interest. Technical assistance on evaluation-related issues will be assessed on an individual basis. RTI's on-site evaluation coordinator, Jayne Harper, will contact each project director to assess your evaluation TA needs.

Group VI

- How much input will my coalition have in choosing programs?
 Coalitions are to choose which model programs they will implement through their needs assessment. These choices should be based on available data.
- Can the coalition choose a science-based program not on the list?

 This is not an evaluation-related question. This question should be put to OSA/One ME staff.
- Will the surveys come from one of the evaluation firms to the coalitions?
 (vs. coalitions creating or copying them on-site)
 RTI and HZA will provide all data collection materials and protocols to the coalitions prior to any data collection efforts. We also will notify project directors of all data collection activities prior to these efforts occurring.
- How can we obtain web addresses for other states' data, process evaluation and/or information from others in SIG cohort?
 We will look into this.
- How much analysis will be expected of local coalitions?
 None is expected, but if you choose to, you should share your plans so we can make sure there is no duplication of effort.
- If we used a program (tweaked slightly) how can we make sure it is effective locally? And rigorous enough to add to scientific literature? Without knowing what program and what modifications were made, it is difficult to provide a concrete answer. Either RTI or HZA will collect outcome data from your program participants to measure program effectiveness. NOTE: Most coalitions will not use comparison (i.e., participants who do not receive the program) groups in this project. Thus, RTI will discuss program effectiveness within those constraints. However, if you have an adequate sample size with precise and complete documentation about implementation and fidelity, it's possible that your findings would have a place in the scientific literature.